FORM D

filing of a federal notice.

SEC-1972 (5-05)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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April 30, 2008

Expires: Estimated average burden hours per response...... 16.00

SEC USE	ONLY
Prefix	Serial
1]
DATE RE	CEIVED

Name of Offering (check if this is an amendment a Note and Warrant Financing	nd name has changed, and indicate change.)	
Filing Under (Check box(es) that apply):	. – – ,,	ULOE
<u> </u>	A. BASIC IDENTIFICATION DATA	THE STATE AND AREA COMPANIES AND AREA COMPANIES
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment a Eurekster, Inc.	nd name has changed, and indicate change.)	06049455
Address of Executive Offices 350 Sansome St., Suite 400, San Francisco,	(Number and Street, City, State, Zip Code) California 94104	Telephone Number (Including Area Code) (415) 433-3303
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street City State Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Internet software development	NOV 1 7 2006 3	RECEIVED
	THOMSUN FINANCIAL partnership, already formed other (pl partnership, to be formed	lease specify): NOV 1 3 2006
Actual or Estimated Date of Incorporation or Organiza Jurisdiction of Incorporation or Organization: (Enter		
GENERAL INSTRUCTIONS	<u> </u>	
Federal: Who Must File: All issuers making an offering of securi 77d(6).	ties in reliance on an exemption under Regulation D or	Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 and Exchange Commission (SEC) on the earlier of the which it is due, on the date it was mailed by United St	date it is received by the SEC at the address given bel	A notice is deemed filed with the U.S. Securities low or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commis	sion, 450 Fifth Street, N.W., Washington, D.C. 2054	9.
Copies Required: Five (5) copies of this notice must be photocopies of the manually signed copy of bear typed	le filed with the SEC, one of which must be manually or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all i thereto, the information requested in Part C, and any monot be filed with the SEC.	nformation requested. Amendments need only report aterial changes from the information previously suppli	the name of the issuer and offering, any changes ed in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate reliance on the UULOE and that have adopted this form. Issuers relyi are to be, or have been made. If a state requires the accompany this form. This notice shall be filed in the this notice and must be completed.	ng on ULOE must file a separate notice with the Sepayment of a fee as a precondition to the claim for the appropriate states in accordance with state law.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
Failure to file notice in the appropriate sta appropriate federal notice will not result in	ntes will not result in a loss of the federal ex n a loss of an available state exemption unle	emption. Conversely, failure to file the

Persons who respond to the collection of information contained in this form pare not required to respond unless the form displays a currently valid OMB control number.

 $1.\ of\ 5$

			A. BASIC IDE	NTIFICATION DATA			
2. Enter the information r	equested for the fol	lowi	ng:				
• Each promoter of	the issuer, if the issu	er ha	is been organized w	ithin the past five years;			
Each beneficial own	ner having the power	to vo	te or dispose, or dire	ct the vote or disposition of	, 10% or more of a	a class	of equity securities of the issuer.
Each executive off	ficer and director of	còrp	rate issuers and of c	corporate general and man	aging partners of	partne	rship issuers; and
Each general and to	managing partner o	f par	tnership issuers.				
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if Ryan, Grant	f individual)						
Business or Residence Addr 350 Sansome St., Suite							
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Marder, Steven E.	if individual)						
Business or Residence Addr 350 Sansome St., Suite							
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Evers, Ridgely	if individual)						
Business or Residence Addr 350 Sansome St., Suite	•			•			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Thomas E. Lauerman F		U/T/	/I dated Oct. 30,	2000	, <u></u>		
Business or Residence Addr 3009 W. 118 th , Leawood	ess (Number and St I, Kansas 66211	reet,	City, State, Zip Co	de)			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, Kourion Investments, I							
Business or Residence Addr c/o Betty Searle, Unit 90							
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)			•			
Business or Residence Addr	ess (Number and St	reet,	City, State, Zip Coo	de)	·		· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					•	
Business or Residence Addr	ess (Number and St	reet,	City, State, Zip Coo	de)			

			na si	B. IN	FORMATI	ON ABOU	TOFFER	ING	adust 6	1		
1. Has	the issuer sold,	or does the	issuer inten	d to sell, t	o non-accred	lited investe	ors in this of	ffering?		•	Yes	No
			Answer als	so in Appe	endix, Colum	ın 2, if filin	g under UL	OE.				
2. Wh	at is the minimu	m investme	nt that will	be accepte	d from any i	ndividual?				•••••	\$ N/A	NI-
, 2 'De-	es the offering p			S 1			i.	•			Yes	No □
4. Ent	er the informati	on requeste	d for each	person wi	ho has been	or will be	paid or giv	en, directly	y or indire	ctly, any		
	nmission or simi person to be list											
or s	tates, list the na	me of the bi	oker or dea	ler. If mo	re than five (5) persons	to be listed					
	roker or dealer, y ne (Last name fi	• -	•	iormation	for that brok	er or deale	r only.					•
		i.		1				_	•			
Business	s or Residence A	ddress (Nur	nber and St	reet, City,	State, Zip C	ode)	4.	·				
·	Associated Bro	<u>.</u>	·	<u> </u>								
States in	Which Person I	isted Has S	olicited or I	ntends to	Solicit Purch	nasers						
. (Check "All State	es" or check	individual S	States)		· · · · · · · · · · · · · ·			• • • • • • • •		🔲	All States
AL	AK	AΖ	AR	CA	CO	СТ	DE	DC	FL	GA	н	·ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
ΜŢ	NE	14	. NH	ŊJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	, SD	TN	TX	UΤ	VT	VA	WA .	wv	wı	WY	PR
Full Nan	ne (Last name fi	rst, if indivi	dual)				,		••			
Business	s or Residence A	ddress (Nur	mber and St	reet, City,	State, Zip C	ode)					<u> </u>	
Name of	Associated Bro	ker or Deale	er		•			1				-
States in	Which Person I	isted Has S	olicited or I	ntends to	Solicit Purch	nasers						
(Check "All State	es" or check	individual S	States)								All States
AL	AK	ΑZ	AR	CA	CO	СТ	DE	DC	FL	GA	HI	ID
IL	ĪN	ĪΑ	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
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RI	sc	SD G	TN	TX	TU	VT	VA	WA	wv	wı	WY	PR
Full Nan	ne (Last name fi	rst, if indivi	dual)		•							
Business	s or Residence A	ddress (Nur	mber and St	reėt, City,	State, Zip C	ode)						
Name of	Associated Bro	ker or Deale	er					 · · · ·			,	
	Which Person I Check "All State				Solicit Purch	nasers						All States
AL	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	ĜA	<u>Ш</u> .	ID
ĪL	IN	ĪΑ	KS	KY	LA	ME	MD	MA	MI	MN	MS	. МО
мт	NE	īv	NH .	NJ	NM	NY	NC	ND	ОН	рк	OR	PA
RI	sc	SD	TN	TX	UT	VT	VA	WA	wv	wi .	WY	PR
							——·					

,	-				
-		(Use blank sheet, c	r copy and use additional copies of this sheet, as nece	ssary.)	
		C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
1.	sold. Enter "0" if th	e answer is "none" or "z	es included in this offering and the total amount already ero." If the transaction is an exchange offering, check we the amounts of the securities offered for exchange and		
	Type of Security	,		Aggregate Offering Price	Amount Already Sold
	Debt		\$ Company Comp	1,500,000.00	\$ <u> </u>
			Common Preferred	,	
	Convertible Sec	urities (including warrants)\$	225,000.00 ⁴	147,253.70
•			\$		
	Other (Specify		\$		\$
	Total	4		1,725,000,00	s 1.134.642.80
	Ans	wer also in Appendix. O	\$ Column 3, if filing under ULOE.		
2.	Enter the number of offering and the agg the number of pers	faccredited and non-acc regate dollar amounts of ons who have purchase	redited investors who have purchased securities in this their purchases. For offerings under Rule 504, indicate d securities and the aggregate dollar amount of their swer is "none" or "zero."		
:	· · · · · · · · · · · · · · · · · · ·			Number Investors	Aggregate Dollar Amount of Purchases
•	Accredited Inv	stors		. 6	\$ 1,134,642.80
•		<u>,</u>			\$ 0
•			only)		<u> </u>
		1	x, Column 4, if filing under ULOE.		
3.	If this filing is for an sold by the issuer, t	offering under Rule 504 o date, in offerings of the	or 505, enter the information requested for all securities types indicated, in the twelve (12) months prior to the ify securities by type listed in Part C — Question 1.		
• •	Type of Offerin	t-		Type of Security	Dollar Amount Sold
	Rule 505	<u> </u>		<u> </u>	\$
	Regulation A			•	\$
	Rule 504	1 •		·	\$
	Total	,		0	\$ 0
4 [.]	 a. Furnish a state securities in this off The information ma 	ment of all expenses in fering. Exclude amounts y be given as subject to	connection with the issuance and distribution of the relating solely to organization expenses of the insurer. future contingencies. If the amount of an expenditure is e box to the left of the estimate.		
	Transfer Agent	s Fees			\$
					•
	I and Food)			\$ 20,000.00
	Legarrees	ì		\(\overline{\overlin	#U,UU.UU

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Other Expenses (identify)

American LegalNet, Inc. www.USCourtForms.com

20,000.00

□ \$_

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and total expenses furnished in response	to Part C — Question 4.a. This difference is the	"adjusted gross	
			\$ 1,705,000.00
each of the purposes shown. If the an check the box to the left of the estimat	sted gross proceed to the issuer used or proposed mount for any purpose is not known, furnish a te. The total of the payments listed must equal the ponse to Part C — Question 4.b above.	n estimate and	
		Payments to Officers, Directors, & Affiliates	Payments to Others
•			
Purchase of real estate		ss	_ 🗆 s
Purchase, rental or leasing and install and equipment	lation of machinery		_ 🗆 \$
Construction or leasing of plant build	dings and facilities	s <u></u> s	_ 🗆 s
offering that may be used in exchang	uding the value of securities involved in this to for the assets or securities of another		
issuer pursuant to a merger)		🔲 s	_ 🛚 🕽 \$
Other (specify):	<u> </u>	Us	_ 🗆 s
		····· 📋 \$	_ 🗆 \$
Column Totals			0 × \$_1,705,000.00
•	s added)		0 S 1,705,000.00
Total Payments Listed (column totals		s <u> </u>	1,705,000.00
Total Payments Listed (column totals The issuer has duly caused this notice to be signature constitutes an undertaking by the information furnished by the issuer to	e signed by the undersigned duly authorized person issuer to furnish to the U.S. Securities and Excany non-accredited investor pursuant to paragraph	sn. If this notice is filed under F hange Commission, upon writt aph (b)(2) of Rule 502.	1,705,000.00
Total Payments Listed (column totals The issuer has duly caused this notice to be signature constitutes an undertaking by the information furnished by the issuer to Issuer (Print or Type)	e signed by the undersigned duly authorized person issuer to furnish to the U.S. Securities and Excany non-accredited investor pursuant to paragrams. Signature	on. If this notice is filed under Fehange Commission, upon writt aph (b)(2) of Rule 502.	1,705,000.00 Lule 505, the following en request of its staff,
Total Payments Listed (column totals The issuer has duly caused this notice to be signature constitutes an undertaking by the information furnished by the issuer to Issuer (Print or Type) Eurekster, Inc.	e signed by the undersigned duly authorized person issuer to furnish to the U.S. Securities and Excany non-accredited investor pursuant to paragrams. Signature	sn. If this notice is filed under F hange Commission, upon writt aph (b)(2) of Rule 502.	1,705,000.00 Lule 505, the following en request of its staff,
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